

BEST AVAILABLE COPY

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY			
<ul style="list-style-type: none">■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.		<table border="1"><tr><td>A. Received by (Please Print Clearly)</td><td>B. Date of Delivery</td></tr></table>		A. Received by (Please Print Clearly)	B. Date of Delivery
A. Received by (Please Print Clearly)	B. Date of Delivery				
1. Article Addressed to: Mr. Joachim Wottrich 808 Ferdinand Avenue Forest Park, IL 60130		C. Signature X <div style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</div>			
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No			
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.			
		4. Restricted-Delivery? (Extra Fee) <input type="checkbox"/> Yes			
2. Article Number (Copy from service label)		7000 1670 0004 1399 5176			

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952